[Editorial]

Happy Anniversary!

Sports medicine clinicians face the never-ending task of adapting to the ever-evolving world of athletic medicine. As athletes strive to improve their performance with new training regimens, upgraded conditioning programs, fad diets, and nutritional supplements, clinicians must be knowledgeable of the effects of all these adjustments and adjuncts to the athlete's routine. Healthy athletes who are performing well and feeling good may prove challenging for physical therapists, athletic trainers, and physicians by inquiring how *good* can become *better*. Some may be willing to sacrifice their own health to get to the next level by experimenting with supplements and illicit drugs. More desperate may be the athlete who is not up to par after injury or illness and is in fear of losing his or her status on the team. That fear may lower resistance to experimental and unproven therapies.

Many athletes at various levels of competition, from the youngest to the oldest and the amateur to the elite, are so dependent on their athletic identity that they may risk their health and safety to remain competitive. These challenging times in athletic careers are best monitored by those who do not have a stake in the athletic competition; coaches and some parents may not fill this role as they may have a vested interest in the athletic endeavor, whether success brings another victory, a college scholarship, or a lucrative contract. This is where the medical team must remain objective and be able to evaluate risks associated with injury, illness, and treatment regimens.

Risk assessment may be particularly difficult for those directly associated with the team. Managing the day to day care of athletes while remaining objective and not getting caught up in the "hoopla and fever" of sports seasons can be difficult. Reasonable minds can be swayed if they allow outside pressures to influence their judgment. Challenging scenarios include return to play after injury or illness, the appropriateness of the treatment regimen, and health and safety risks. Ideally, these challenges are best met with an armamentarium of medical knowledge gleaned from the best medical science. Clinicians who remain medically competent through a consistent, balanced, educational platform are best suited to answer the difficult questions and perform the risk assessments associated with athletic competition. Unfortunately, professional medical licenses and certifications are really only a permit for continued learning. In today's world, once educational efforts cease, clinicians quickly become outdated and can no longer deliver cutting-edge medical care. Continuing medical education is an absolute necessity in today's world.

Sports Health's efforts to provide timely, scientific medical evidence are highlighted in this issue by several articles. "Fueling for Performance" by Dr Jeffrey Bytomski[5] emphasizes the macro- and micronutrient requirements for all athletes, including those who are vegetarian or vegan. These requirements vary widely depending on the sport, position, and timing of the season, and for many athletes, the standard dietary approach is insufficient and they end up looking for additives to supplement their intake. "Prohibited Contaminants in Dietary Supplements" by Mathews[7] recognizes the risk that 69% to 94%[2,3,6,8,11] of elite athletes take while ingesting products promising to "improve their health and performance"—products that are manufactured by a $38.8 billion industry.[9] Unfortunately, 86% of college athletes are unaware that supplements can have adverse effects.[11]

Most athletes hope to improve strength through resistance training. The review by Butts et al[4] on creatine use in sports recognizes the likely safety of creatine for increased performance in short duration, maximal intensity resistance training while questioning whether it improves performance on the field of play.

For many athletes, a major consideration for athletic competition is planning for travel related to competition. For those athletes whose travels cross several time zones, the review on medications for sleep schedule adjustment[1] is an invaluable compilation of the safe use of melatonin, caffeine, and nonbenzodiazepine sleep aids. No doubt, good sleep aids athletic performance.

Finally, for clinicians caring for the ever-growing numbers of athletes taking medication for attention deficit hyperactivity disorder (ADHD), the review by Stewman et al[10] outlines the correct use of these medications while highlighting concerns for stimulants with regard to heat illness and concussion. Those individuals who carry the ADHD diagnosis usually benefit from athletic activity, so remaining aware of the potential side effects of these medications is well worth the time.

Clinicians of highly effective sports medicine teams rely on sources of medical information that foster the team approach. Good teams understand the roles and responsibilities of each member and build on that collaboration to strengthen the team effort. As *Sports Health* enters its 10th year of publishing, the question is: Have we filled this role? The disciplines of athletic

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training, physical therapy, primary care, and orthopaedic surgery have contributed to this publication via the hard work of many authors, reviewers, and their respective associate editors. With it being our 10th year of publication, it is worthwhile to reflect on how far we have come. With a circulation of more than 25,000, *Sports Health* is read around the world, with subscribers in every inhabited continent. The journal is indexed in MEDLINE and garners online full-text downloads tallying more than 100,000 per month. While these numbers are promising and something to be proud of, the question of whether we are fulfilling our goal of providing the sports medicine team with the science needed to provide excellent care for athletes and active people can only be answered by our readers.

The 5 publications highlighted in this editorial represent the relevant balanced scientific data that *Sports Health* strives to bring into the sports medicine community. We hope we are meeting the needs of sports medicine teams. Thanks for your support over the past 10 years!

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